

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	C-C.		09-04-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		1128	10/04/01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral).... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	02-07-94
Original	
1C	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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